

Maricopa County Department of Public Health Request for Certified Copy of ARIZONA Fetal Death Certificate

Date Stamp Here

Mail Application: MCOVR (Maricopa County Office of Vital Registration) PO Box 2111 – Phoenix AZ – 85001				CUSTOMER Checklist			
Fe		d Copy on or Major Change to an AZ Fetal Death	Record	□ ID Required - Front and Back Photocopy of Your Valid, Signed Government Photo ID OR Have Your Signature Notarized on Application □ Sign the Application − Don't Forget! □ Include a Self-Addressed Stamped Envelope □ Correct Fee Required − Please, no Cash or Checks □ Any Required Documents (e.g. Proof of Relationship, etc.)			
Please! No Cash and Checks – Thank you!							
Order Info	Today's Date	Request for Certified Copy of: Fetal Death Certificate of Birth Resulting in Stillbirth	# of Copies Re	quested	Payment Method	Amount Enclosed	
	Name on Fetal Death Certificate First Middle Last Suffix						
Death Certificate Information	Date of Delivery			County			
ertificat	Mother's Maiden Name First Middle Last						
ŏ							
Death	Funeral Home (If App		Purpose of Request				
ificate	Applicant's Signature	Print Applicant	Print Applicant's Full Name: First, Middle, Last				
Person Requesting Certificate	Email o		Cell/Telephone Number				
equest	Mailing Address Ant/Suite City State 7 in Code						
n R	Street						
Perso	Your Relationship to Person on Certificate- Check One *PROOF of Relationship MUST be Provided if You are NOT Named on the Certificate Parent Other Othe						
Notary Area	State ofCounty of						
	On this day of, 20 before me personally appeared (name of signer), whose identity was					Affix Seal/Stamp Here	
Nota	proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and who acknowledge that he/she signed the above document.						
	Notary Signature My Commission Expires						
Office Use Only	Gov't Issued ID State File N				State File Numb	er	
	Documents Verified				Request ID		
	Verification: □ Process □ Return by Mail □ Call				Date Entered	<u></u>	
		☐ No Fee/ Incorrect Fee ☐ Need Clear Copy of ID		ible rd	Date Issued Serial Numbers		
	☐ CC Expired ☐ ID Expired/Invalid	□ Need ID w/ Signature □ Need Signature	□ Need Documen □ Other	ts	Receipt #		
70	Payment Information						
Credit Card					□ мс	*Must attach copy of credit card holder's valid, current government photo ID with signature.	
	Signature of Card Hole						

Apply by Mail. Send Complete, Signed Application with Fee to:

MCOVR (Maricopa County Office of Vital Registration) PO Box 2111 – Phoenix AZ – 85001

MaricopaVitalRecords.com - Download and Print Forms, Read FAQs and Directions

Apply In Person: 4 Locations Valley wide

Central Valley - 3221 N. 16th St., Ste. 100, Phoenix 85016 (1 Block S. of Osborn)

North Valley - 2423 W. Dunlap Ave., Ste. 110, Phoenix 85021 (E. of I-17 Exit Dunlap)
West Valley - 1850 N. 95th Ave., Ste. 182, Phoenix 85037 (101 Fwy/N. of McDowell)
East Valley - 4419 E. Main St. Ste., 105, Mesa 85205 (I-60/202 Red Mtn North Fwy)

Hours: Monday-Friday 8:00am-4:30pm – Closed holidays and Other Dates

Phone: 602-506-6805

Apply Online: <u>VitalChek.com</u> – Additional fees for service in addition to cost per certified copies.

**Mail and walk-in services may be faster and with no add-on fees!

Fees: \$20.00 Per Certified Copy

\$30.00 Change to vital record and fee includes 1 certified copy

Questions? Call or Stop in! We are here to assist you.